



COMMUNITY PROJECT ACCOUNT
(Small, De Minimus Public Projects)

APPLICATION

1) Name of Project: Tigerville Fire Safety and Security Project

Check Project Type:

Nonrecurring community requests for infrastructure:

- Flooding
- Roads
- Lights
- Sewer and drainage
- Public buildings and grounds
- Infrastructure related studies

Contributions to local governments in Greenville County for community projects

2) Amount of Funds Requested: \$ 10,800

3) Project Sponsor

Organization: Tigerville Fire Department

Mailing Address: 2605 Hwy 414

Travelers Rest, SC 29690

4) Contact Person:

Name Chief Russell Ledford Title Chief

Telephone 895-8855 Alt. Telephone No. 770-5656

Email chief@tigervillefd.com Fax No. 895-2295

Council Representative(s) Joe Dill

5) Project Timeline ~ Beginning: summer 2013 Ending: fall 2013
MONTH/DAY/YEAR MONTH/DAY/YEAR

6) Date Funds are Needed: As soon as possible

7) Location of Project: Station – 2605 Hwy 414, Travelers Rest

8) Project Description: (Attach additional pages if necessary)

a. General Description: Security and safety improvements to building
and grounds

b. Benefit project will provide the Community:
Makes facility safer and more secure

c. Additional Comments: _____

9) Project Budget:

a. Total Project Budget including all sources of funds: \$ 10,800

b. Percent request equals of the total Project Budget? 100%

List below all funding sources for this project:

Funding Source	Amount
Community Project Account Grant (Greenville County)	\$10,800
TOTAL:	\$10,800

Russell Ledford
Signed

August 5, 2013
Date

Chief, Tigerville Fire Department
Title

